



CENTER OF EXCELLENCE
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**ASIA-PACIFIC DISEASE OUTBREAK
/SURVEILLANCE REPORT**

Week of May 03, 2004

BANGLADESH

Diarrhea Outbreak in Jessore District

More than 1,000 (mostly children under 5) were affected by diarrhea in the Jessore district during the past month. Of these, one infant has already died. The severe hot spell now persisting in the district and scarcity of potable water have contributed to the disease spreading. Health Department sources say that some 125 diarrhea-affected people were treated at the district 250-bed hospital since April 22. Jessore Hospital sources said they admitted 29 diarrhea patients in the first week, 70 in second week, 26 in third week of April for treatment. Doctors say the outbreak of the disease may become widespread if the temperature rises. Currently there is scarcity of oral saline and medicine in the hospitals.

Source:

· News From Bangladesh, May 04, 2004, <http://www.bangladesh-web.com/view.php?hidDate=2004-05-04&hidType=LOC&hidRecord=000000000000000007492>

Nipah Virus kills 35 in Bangladesh -- Outbreak in 6 Areas

The World Health Organization has reported two small, but extremely deadly, human outbreaks in Bangladesh of the Nipah virus -- a rare virus that first emerged in 1998. WHO says the virus has been discovered in six Bangladeshi districts between January 17 and April 14. Of the 53 people identified as having contracted the virus -- which typically causes extremely high fever, seizures and encephalitis -- 35 have died. Nipah's high mortality rate -- 66% in this latest outbreak -- makes it one of the world's most lethal viruses for humans and is considered a potential bioterrorism agent. However, the virus is not known to be transmitted effectively between humans, suggesting that a widespread human outbreak in Bangladesh or elsewhere is not likely. The ultimate source of Nipah in nature has yet to be identified. The latest findings point to flying fox bats.

Source:

· News From Bangladesh, May 03, 2004, <http://www.bangladesh-web.com/view.php?hidDate=2004-05-03&hidType=NAT&hidRecord=0000000000000000007374>

Nipah Virus not a Threat to Visitors

A US physician, now in the capital with a team of experts working to combat possible

threat of viral disease Nipah, said the virus does not pose a threat to visitors. Dr Michael Bell, chief of Epidemiology, Center for Disease Control, Atlanta, USA has stated that the disease might strike any part of the globe any time. The virus-affected Faridpur does not pose a threat to anyone visiting or passing through. US citizens living in Bangladesh had been advised not to visit Faridpur. Dr Bell is among more than a dozen experts visiting the district to assess the causes of outbreak, which had puzzled local physicians. One child is under treatment at Faridpur Medical College Hospital and no other patients reported to the hospital since April 22. Six teams of national and international experts are working to find the causes of the disease, probable carriers and transmission of the virus.

Source:

· The Daily Star, May 05, 2004, <http://www.thedailystar.net/2004/05/05/d40505011414.htm>

CHINA

Investigation of SARS Source Continues

Investigation of the source of the current SARS outbreak continues to focus on the National Institute of Virology in Beijing. The institute is known to have conducted experiments using the live SARS coronavirus during February and March 2004. Two researchers at the institute developed SARS in March and April 2004. Neither is known to have conducted research using the live virus, suggesting some other source of infection within the laboratory or elsewhere. A joint WHO-Chinese investigative team entered the institute 30 April and 4 May 2004. Initial findings indicate that the investigation will be complex, as no single infectious source, or procedural error, appears likely to explain the infection. Continuing investigation is needed to determine the source of infection and ensure that conditions, equipment, and biosafety procedures do not pose an ongoing risk.

Source:

· WHO SARS update, May 05, 2004, http://www.who.int/csr/don/2004_05_05/en/

· Promed Mail, Apr 05, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:8503727526352578720::NO::F2400_P1001_BACK_PAGE,F2400_P1001_PUB_MAIL_ID:1010,25320

SARS Update

Since 22 April 2004, Anhui province has reported 2 cases of SARS, Beijing has reported 7 cases of SARS, and other provinces have not reported any suspected or confirmed cases of SARS. During this period there have been no reports of other cases from other provinces. All previously suspected cases of SARS have been confirmed as due to SARS coronavirus infection by the laboratories in China. Confirmation of these laboratory results by an independent outside reference laboratory is still pending, but based on the clinical and epidemiologic information, it is highly likely that all cases will be confirmed.

Source:

· China MOH SARS update, May 04, 2004, <http://www.moh.gov.cn/zhgl/zt/yqfb/1200405040001.htm>

· Promed Mail, May 04, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:8503727526352578720::NO::F2400_P1001_BACK_PAGE,F2400_P1001_PUB_MAIL_ID:1010,25315

INDIA

Outbreak of Undiagnosed Disease in Ahmedabad, India

An undiagnosed disease exhibiting jaundice has claimed 3 lives in the city, and more than 120 cases have been registered in the eastern suburbs. The majority of the cases were registered from New Bhavaninagar and Gayatrinagar of the Amraiwadi area in the last few days. As many as 14 cases have been registered from the Nava Vadaj area of the city. It is believed that contaminated drinking water supplied to Amraiwadi and other eastern suburbs is the main cause of the disease. Water-borne hepatitis can usually be attributed to infection by either hepatitis A virus or hepatitis E virus, as a result of fecal contamination of water-supplies. Hepatitis A virus infection generally resolves without complication, and effective vaccines are available. Hepatitis E virus, which was first isolated in India, can be more threatening. No vaccine is available at present.

Source:

· The Times of India, May 03, 2004, <http://timesofindia.indiatimes.com/articleshow/657073.cms>

· Promed Mail, May 04, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:8503727526352578720::NO::F2400_P1001_BACK_PAGE,F2400_P1001_PUB_MAIL_ID:1010,25313

SRI LANKA

Dengue May Become Epidemic in Colombo Metropolis

Over 180 cases of Dengue have been detected within the Colombo metropolis, indicating that the disease could assume epidemic proportions if uncontrolled. The numbers detected so far reveal an increase of over 90 percent over 2003. There were usually two peaks of the disease during a year, from June to July and December to January, which followed heavy rains. Currently fogging and spraying of chemicals in high-risk areas are being done, but because the dengue carrying mosquito is a low-flying insect, these activities are not 100 percent effective. A survey carried out in 2003 revealed that the vector was found not only in the slums and other poor districts of the city but in plush residential areas such as Colombo 3,4 and 7 as well. Broken and clogged drains, coconut shells and tires left lying around are common causes for the spread of dengue.

Source:

· Sunday Observer, Sri Lanka, May 02, 2004, <http://www.sundayobserver.lk/2004/05/02/new25.html>

· Promed Mail, Apr 06, 2004,

http://www.promedmail.org/pls/askus/f?p=2400:1001:8503727526352578720::NO::F2400_P1001_BACK_PAGE,F2400_P1001_PUB_MAIL_ID:1010,25322

Other World News

WORLD

Recommendations from WHO's Consultation on Zoonoses

International experts concluded a three-day consultation on zoonoses, held by the World Health Organization (WHO) together with the Food and Agriculture Organization (FAO) and the World Organization for Animal Health (OIE), in collaboration with the Dutch Health Council. Experts agreed on numerous conclusions and recommendations for the control and prevention of future diseases transmitted from animals to humans (zoonoses). These can be found on the referenced websites. Recommendations included using new tools (satellite remote sensing data, analytical molecular epidemiology), bringing together different disciplines (medical, veterinary, population

biology, information technology, diagnosis), integrating the early warning and alert systems of international organizations, and integrating animal and human health data at national and regional levels.

Source:

- WHO Website, May 05, 2004, <http://www.who.int/mediacentre/briefings/2004/mb3/en/>
- Utusan Online, May 06, 2004, http://www.utusan.com.my/utusan/content.asp?y=2004&dt=0507&pub=Utusan_Express&sec=Discoveries&pg=di_04.htm

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